CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS FAIR POLITICAL PRACTICES COMMISSION COVER PAGE

\ \	Ple	ase type or print in ink.	12 MAR 22	PH 12: 5	<u> 57 </u>	Amend	50	-		
"	NAN	E OF FILER (LAST)	· · · · · · · · · · · · · · · · · · ·		(FIRST)			(MIDI	,	
	В	estolarides		Steve			- !	J滑	<u>~</u>	
٠	1.	Office, Agency, or Court							MAR	ĵΠ
		Agency Name							100	\bigcirc
		San Joaquin County						TO 		[1]
		Division, Board, Department, District, if applicable	9		Your Position		Ì			~
		Board of Supervisors			Superviso	or, Third District	_륍_	V0.	<u>ö</u>	
		▶ If filing for multiple positions, list below or on	an attachment.				DEPUTY	ERS		<u></u>
		Agency: See Attached			Position:			<u>.</u>		
•	2.	Jurisdiction of Office (Check at least	one box)							
		☐ State	•		☐ Judge or Co	ourt Commissioner (Sta	atewide	Jurisdiction	on)	
		Multi-County				San Joaquin				
		City of								
					Other					
,	3.	Type of Statement (Check at least one	box)		 					
		Annual: The period covered is January 1, 2 December 31, 2011.	2011, through		Leaving O	ffice: Date Left				
		The period covered is	/, t	hrough	O The per leaving	riod covered is January office.	y 1, 201	1, throug	h the da	ate of
		Assuming Office: Date assumed/_		-		riod covered is	ii	· · · · ·	, th	rough
		X Candidate: Election Year2012	Office sou	ght, if differe	nt than Part 1:		_			
Z	4. Schedule Summary									
		Check applicable schedules or "None."	ì	► Total nu	ımber of page	s including this o	cover	page: _	<u> </u>	
		Schedule A-1 - Investments - schedule atta	ched	П	Schedule C - Inc	ome, Loans, & Busine	ss Posi	tions – so	hedule	attached
		Schedule A-2 - Investments - schedule atta	ched			ome – Gifts – schedul				
		Schedule B - Real Property - schedule atta	ched		Schedule E - Inc	ome – Gifts – Travel I	aymen	s – sche	dule att	ached
			-or-							
			None - No reporta	ble interests	on any schedule					
										<u> </u>
		parain and in any attached ashedular is the and	anmulate 1 all-		;					
		nerein and in any attached schedules is true and certify under penalty of perjury under the lan	•	•						
		Date Signed 2/20/12		Signa						

ATTACHMENT TO FORM 700

2011 ANNUAL STATEMENT

RECEIVED FAIR POLITICAL PRACTICES COMMISSION

12 MAR 22 PM 12: 57

Bestolarides, Steve

Council of Government	Member
Mental Health Advisory Board	Alternate
City/County Liaison Committee	Member
Retirement Board	Member
Caltrans Rail Task Force Steering Committee	Member
San Joaquin Flood Control Agency	Alternate
Ad Hoc Green Belt Policy Committee	Member
San Joaquin Regional Rail Commission	Member
Farmington Dam Recharge Executive Coordinating Committee	Member
Health Care Services Review Project	Member
Deferred Compensation Committee	Member
Medical Executive Committee	Member
Health Commission – HPSJ	Member
County Facilities Committee	Member
Hospital Joint Conference Committee	Member
Interim SJGH Board of Trustees	Member

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION Name Steve J. Bestolarides

▶ 1. BUSINESS ENTITY OR TRUST	► 1. BUSINESS ENTITY OR TRUST
H. P. Bestolarides & Sons	
Name	Name
154 8-Mile Rd., Stockton CA 95210	
Address (Business Address Acceptable) Check one	Address (Business Address Acceptable) Check one
☐ Trust, go to 2 ☑ Business Entity, complete the box, then go to 2	☐ Trust, go to 2 ☐ Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 / / 11 / / 11 / / 11 / / 11 / / 11 S100,001 - \$1,000,000 ACQUIRED DISPOSED S100,001 - \$1,000,000 Over \$1,000,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 /
NATURE OF INVESTMENT Sole Proprietorship Partnership	NATURE OF INVESTMENT Sole Proprietorship Partnership
Other	Other
YOUR BUSINESS POSITION General Partner	YOUR BUSINESS POSITION
▶ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME <u>TO</u> THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
☐ \$0 - \$499 ☐ \$10,001 - \$100,000 ☐ \$500 - \$1,000 ☑ OVER \$100,000 ☐ \$1,001 - \$10,000	S0 - \$499 S10,001 - \$100,000 OVER \$100,000 OVER \$100,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF
INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	☐ INVESTMENT ☐ REAL PROPERTY
154 E. 8-Mile Rd., Stockton CA 95210	
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
Real Estate Investment	
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other Other
Check box if additional schedules reporting investments or real property are attached	Check box if additional schedules reporting investments or real property are attached

Comments:_

RECEIVED FAIR POLITICAL PRACTICES COMMISSION F

12 MAR 22 PM 12: 57

SCHEDULE B Interests in Real Property (Including Rental Income)

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
Nama

Name

Steve J. Bestolarides

CITY	CITY
Stockton CA 95210	H
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 ACQUIRED DISPOSED Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$1,000,000 Over \$	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust Easement	Ownership/Deed of Trust Easement
Leasehold Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
S0 - \$499 S500 - \$1,000 S1,001 - \$10,000	☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
S10,001 - \$100,000 OVER \$100,000	☐ \$10,001 - \$100,000 ☐ OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or greate interest, list the name of each tenant that is a single source income of \$10,000 or more.
You are not required to report loans from commercial	lending institutions made in the lender's regular course
	without regard to your official status. Personal loans a
business on terms available to members of the public	lending institutions made in the lender's regular course without regard to your official status. Personal loans a siness must be disclosed as follows:
business on terms available to members of the public loans received not in a lender's regular course of bus	without regard to your official status. Personal loans a iness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank
business on terms available to members of the public loans received not in a lender's regular course of bus	without regard to your official status. Personal loans a iness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* Bank of Agriculture & Commerce ADDRESS (Business Address Acceptable) PO Box 1140, Stockton CA 95201	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable) 121 W. Pine Street, Lodi CA 95240
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* Bank of Agriculture & Commerce ADDRESS (Business Address Acceptable)	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* Bank of Agriculture & Commerce ADDRESS (Business Address Acceptable) PO Box 1140, Stockton CA 95201	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable) 121 W. Pine Street, Lodi CA 95240
business on terms available to members of the public loans received not in a lender's regular course of bus NAME OF LENDER* Bank of Agriculture & Commerce ADDRESS (Business Address Acceptable) PO Box 1140, Stockton CA 95201 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 7. 36 months	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable) 121 W. Pine Street, Lodi CA 95240 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE (YATIBLE) 724 months
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business Address Receptable (Section 1997) Business Address Acceptable (PO Box 1140, Stockton CA 95201) Business Activity, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) Mone TERM (Months/Years)	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable) 121 W. Pine Street, Lodi CA 95240 BUSINESS ACTIVITY, IF ANY, OF LENDER
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business received not in a lender's regular course of business Address Received	without regard to your official status. Personal loans a siness must be disclosed as follows: NAME OF LENDER* Farmers & Merchants Bank ADDRESS (Business Address Acceptable) 121 W. Pine Street, Lodi CA 95240 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE (VACIBLE) 5.5 None HIGHEST BALANCE DURING REPORTING PERIOD

RECEIVED FAIR POLITICAL PRACTICES COMMISSION

12 MAR 22 PM 12: 57

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

Steve J. Bestolarides

		 		
▶ NAME OF SOURCE		► NAME OF SOURCE	Ē	· · · · · · · · · · · · · · · · · · ·
John Teresi				
ADDRESS (Business Address Accepted	ADDRESS (Business Address Acceptable)			
P O Box 819, Lodi CA 9524	ł1			
BUSINESS ACTIVITY, IF ANY, OF SOL	BUSINESS ACTIVIT	Y, IF ANY, OF	SOURCE	
Transportation		<u> </u>		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>12 / 8 / 11</u> _{\$} 100.00	Fruit Box		\$	
			\$	· ·
			\$	
► NAME OF SOURCE		► NAME OF SOURCE	=	
Al Scannavino				
ADDRESS (Business Address Acceptate	nle)	ADDRESS (Busines	s Address Acce	eptable)
5463 Cherokee Rd., Stockto	on CA 95215	11		
BUSINESS ACTIVITY, IF ANY, OF SOL	IRCE	BUSINESS ACTIVIT	Y, IF ANY, OF	SOURCE
Transportation		II		
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 8 / 11 \$ 60.00	Wine & Olive oil		\$	
			\$	
\$			\$	
► NAME OF SOURCE		► NAME OF SOURCE	=	
Manteca Soroptimist Club -	S.I. Manteca	<u> </u>		
ADDRESS (Business Address Acceptate	ule)	ADDRESS (Busines	s Address Acce	ptable)
PO Box 218, Manteca CA 9	5336			
BUSINESS ACTIVITY, IF ANY, OF SOU	RCE	BUSINESS ACTIVIT	Y, IF ANY, OF	SOURCE
Volunteer organization for W	/omen			
DATE (mm/dd/yy) VALUE	DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 14 / 11 \$ 2000.00	purchased ticket and		\$	
	won the grand prize		\$	
			\$	
Comments:				

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION A PUBLIC DOCUMENT

Date Received
Official Use Only STATEMENTE OF ECONOMIC INTERESTS, PRACTICES CONTRIBUTED 12 FF

12 FFR 13 AM 0

	ase type or print in ink.	12 FEB 15 1	PM I. in	1 LB 13 AT 9: 00
NAM	ME OF FILER (LAST)	12 FEB 15 1		REGISTRAR OF WOTERS
	Besto	LARIDES	Steve	Jim
1.	Office, Agency, or Court			DEPLITY
	Agency Name			7,7,71,7
		AQUIN C		
	Division, Board, Department, District, if applicable		Your Position	
	BOARD OF SUPERI	150RS	Superusor	2, Third District
	\blacktriangleright If filing for multiple positions, list below or on	an attachment.		
	Agency: See Attache	al	Position:	
			1 00100711	
2.	Jurisdiction of Office (Check at least of	one box)	•	
	State			mmissioner (Statewide Jurisdiction)
	Multi-County		\mathcal{L} County of \mathcal{S}	HIUDAOUM
	☐ City of		Other	, <u></u>
			744	
	Type of Statement (Check at least one		_	
,	Annual: The period covered is January 1, 2 December 31, 2011.	:011, through	Leaving Office: (Check one)	Date Left
	-or- The period covered is/	/ through	•	vered is January 1, 2011, through the date of
	December 31, 2011.	, unougn	leaving office.	
[Assuming Office: Date assumed		O The period co the date of lea	vered is, through
١	☑ Candidate: Election Year <u>2012</u>	Office sought, if d	different than Part 1:	· · · · · · · · · · · · · · · · · · ·
	<u> </u>			,
	Schedule Summary	. Tot	al wymbar of popos inc	luding this saver name. 5
•	Check applicable schedules or "None."	▶ 10ta	ai number or pages inc	luding this cover page:5
	Schedule A-1 - Investments – schedule attac		_	oans, & Business Positions - schedule attac
ļ	Schedule A-2 - Investments - schedule attac		Schedule D - Income -	
Į	Schedule B - Real Property – schedule attac	:hed		Gifts - Travel Payments - schedule attached
	п.	-or- Vone - <i>No reportable inte</i>	practs on any schodula	•
		IUITE - IVO TEDARODE UTC	TUSIS UII BIIY SCHEUUIC	

ATTACHMENT TO FORM 700

2011 ANNUAL STATEMENT

Bestolarides, Steve

Council of Government	Member
Mental Health Advisory Board	Alternate
City/County Liaison Committee	Member
Retirement Board	Member
Caltrans Rail Task Force Steering Committee	Member
San Joaquin Flood Control Agency	Alternate
Ad Hoc Green Belt Policy Committee	Member
San Joaquin Regional Rail Commission	Member
Farmington Dam Recharge Executive Coordinating Committee	Member
Health Care Services Review Project	Member
Deferred Compensation Committee	Member
Medical Executive Committee	Member
Health Commission – HPSJ	Member
County Facilities Committee	Member
Hospital Joint Conference Committee	Member
Interim SJGH Board of Trustees	Member

SCHEDULE A-2 Investments, Income, and Assets of Business Entities/Trusts (Ownership Interest is 10% or Greater)

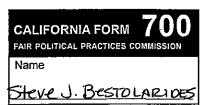
CALIFORNIA FORM FAIR POLITICAL PRACTICES C	
Name	
Str. J. BESTOL	ARIDES

▶ 1. BUSINESS ENTITY OR TRUST	▶ 1. BUSINESS ENTITY OR TRUST
H.P. BESTOLAZIDES ? SONS	
Name 154 8-MILE Da, STOCKTON CA	Name
Address (Business Address Acceptable) 95210	Address (Business Address Acceptable)
Check one Trust. go to 2 Business Entity, complete the box, then go to 2	Check one Trust, go to 2 Business Entity, complete the box, then go to 2
GENERAL DESCRIPTION OF BUSINESS ACTIVITY REAL ESTATE INVESTMENT	GENERAL DESCRIPTION OF BUSINESS ACTIVITY
FAIR MARKET VALUE IF APPLICABLE, LIST DATE:	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$0 - \$1,999 \$2,000 - \$10,000 \$10,001 - \$100,000 Over \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT Sole Proprietorship Partnership Other	NATURE OF INVESTMENT Sole Proprietorship Partnership Other
YOUR BUSINESS POSITION GENERAL PARTNER	YOUR BUSINESS POSITION
➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)	➤ 2. IDENTIFY THE GROSS INCOME RECEIVED (INCLUDE YOUR PRO RATA SHARE OF THE GROSS INCOME TO THE ENTITY/TRUST)
□ \$0 - \$499 □ \$10,001 - \$100,000 □ \$500 - \$1,000 □ \$1,001 - \$10,000	\$0 - \$499 \$10,001 - \$100,000 \$500 - \$1,000 OVER \$100,000 \$1,001 - \$10,000
➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)	➤ 3. LIST THE NAME OF EACH REPORTABLE SINGLE SOURCE OF INCOME OF \$10,000 OR MORE (Attach a separate sheet if necessary.)
▶ 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST	► 4. INVESTMENTS AND INTERESTS IN REAL PROPERTY HELD <u>BY</u> THE BUSINESS ENTITY OR TRUST
Check one box:	Check one box:
☐ INVESTMENT ☐ REAL PROPERTY	INVESTMENT REAL PROPERTY
Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property	Name of Business Entity, if Investment, or Assessor's Parcel Number or Street Address of Real Property
REAL ESTATE INVESTMENT	Description of Dustrana Adjusts or
Description of Business Activity or City or Other Precise Location of Real Property	Description of Business Activity or City or Other Precise Location of Real Property
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 - \$10,000 - \$10,000 11	FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST Property Ownership/Deed of Trust Stock Stock	NATURE OF INTEREST Property Ownership/Deed of Trust Stock Partnership
Leasehold Other	Leasehold Other
Check box if additional schedules reporting investments or real property are attached	Yrs. remaining Check box if additional schedules reporting investments or real property are attached
Comments:	FPPC Form 700 (2011/2012) Sch. A-2.

CALIFORNIA FORM 700 **SCHEDULE B** FAIR POLITICAL PRACTICES COMMISSION Interests in Real Property (Including Rental Income) Name Steve J. Bestolaride

ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS	ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS
154 E. 8-MILE RD.	
CITY	CITY
STOCKTON CA 95210	
FAIR MARKET VALUE IF APPLICABLE, LIST DATE: \$2,000 - \$10,000 11	FAIR MARKET VALUE IF APPLICABLE, LIST DATE \$2,000 - \$10,000 \$10,001 - \$100,000 \$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INTEREST	NATURE OF INTEREST
Ownership/Deed of Trust	Ownership/Deed of Trust Easement
Cheasehold Yrs, remaining Other	Leasehold Other
IF RENTAL PROPERTY, GROSS INCOME RECEIVED	IF RENTAL PROPERTY, GROSS INCOME RECEIVED
\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,000	\$0 - \$499 \$500 - \$1,000 \$1,001 - \$10,00
\$10,001 - \$100,000 OVER \$100,000	\$10,001 - \$100,000 OVER \$100,000
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.	SOURCES OF RENTAL INCOME: If you own a 10% or gre- interest, list the name of each tenant that is a single sou income of \$10,000 or more.
* You are not required to report loans from commercial l business on terms available to members of the public loans received not in a lender's regular course of busin	without regard to your official status. Personal loans
business on terms available to members of the public	without regard to your official status. Personal loans
business on terms available to members of the public loans received not in a lender's regular course of business.	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER*
business on terms available to members of the public loans received not in a lender's regular course of business of LENDER* BANK OF AGYICULTURE & COMMERCE	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER* FARMELS & METICHANTS BANK ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of business of Lender* BANK OF AGYICULTURE & COMMERCE ADDRESS (Business Address Acceptable) P.O. BOX 1140 STOCKTON, CA 95201	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER* FARMERS & METICHANTS BANK ADDRESS (Business Address Acceptable) 121 W. PINE ST Lopi CA 95
business on terms available to members of the public loans received not in a lender's regular course of business and the public name of Lender* BANK OF AGYICULTURE & COMMERCE ADDRESS (Business Address Acceptable) P.O. BOX 1140 STOCKTON, CA 95201 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER* FARMERS & METICHANTS BANK ADDRESS (Business Address Acceptable) 121 W. PINE ST LoDi CA 95 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 5.5 (Variable) 24 Must ha
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business NAME OF AGYICULTURE & COMMERCE ADDRESS (Business Address Acceptable) P.O. BOX 1140 STOCKTON, CA 95201 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years) 7 % None 36 MONTHS	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER* METICHANTS BANK ADDRESS (Business Address Acceptable)
business on terms available to members of the public loans received not in a lender's regular course of business received not in a lender's regular course of business name of Lender* BANK OF AGYICULTURE & COMMERCE ADDRESS (Business Address Acceptable) P.O. BOX 1140 STOCKTON, CA 95201 BUSINESS ACTIVITY, IF ANY, OF LENDER INTEREST RATE TERM (Months/Years)	without regard to your official status. Personal loans ness must be disclosed as follows: NAME OF LENDER* METICHANTS BANK

SCHEDULE D Income – Gifts



► NAME OF SOURCE	► NAME OF SOURCE			
JOHN TEIZES I				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
P.O. BOX 819, 16D) CIA 95241 BUSINESS ACTIVITY, IF ANY, OF SOURCE				
	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
TIZANSPORTATION				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
12,8,11 : 100 Fruit BOX				
	s			
► NAME OF SOURCE	► NAME OF SOURCE			
AL SCANNAVINO				
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
TRANSPORTATION				
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
54163 CHEROKEE ROLSTRACA DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S) 952 6				
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)952-6	DATÉ (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
12,8,11 & LOO. WINE TOINEOIL				
	\$			
➤ NAME OF SOURCE	► NAME OF SOURCE			
ADDRESS (Business Address Acceptable)	ADDRESS (Business Address Acceptable)			
BUSINESS ACTIVITY IF ANY OF SOURCE	BUSINESS ACTIVITY, IF ANY, OF SOURCE			
BUSINESS ACTIVITY, IF ANY, OF SOURCE	BOOKESO ACTIVITY, IF ART, OF GOOKOL			
DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)	DATE (mm/dd/yy) VALUE DESCRIPTION OF GIFT(S)			
\$				
\$	\$			
Comments:				